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## **TRANSMITTAL FORM**

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Total Number of Pages in This Submission

Application Number	09/786,436-Conf. #1340
Filing Date	July 16, 2001
First Named Inventor	Hermann Wagner
Art Unit	1635
Examiner Name	B. A. Whiteman
Attorney Docket Number	C1041.70010US00

	EN	ICLOSURES (Check all	that appl	y)		
X Fee Transn	mittal Form	Drawing(s)		After Allowance Communication to TC		
X Fee A	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences		
X Amendmer	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After	Final	Petition to Convert to a Provisional Application		Proprietary Information		
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence		Status Letter		
x Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):		
Express Abandonment Request Request for Refund			Return Receipt Postcard Check in the amount of \$1,020.00			
Information	Disclosure Statement	CD, Number of CD(s)				
Certified Control Document(	opy of Priority (s)	Landscape Table on CD				
	issing Parts/ Application	Remarks				
	y to Missing Parts under FR 1.52 or 1.53					
	SIGNAT	URE OF APPLICANT, ATTOI	RNEY, OR	AGENT		
WOLF, GREENFIELD & SACKS, P.C.						
Signature Allu Neullut						
Printed name	Helen C. Lockhart					
Date	February 15, 2007		Reg. No.	39,248		

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Dated: February 15, 2007 Signature: Will (Trish McDonald	)

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FEE TRANSMITTAL			Filing Date		July 16, 2001		
	FY 200		First Named Inv		Hermann Wagner		
					B. A. Whiteman	11	
Applicant claims small	· · · · · · · · · · · · · · · · · · ·	····	Art Unit 1635			1000	
TOTAL AMOUNT OF PAY	MENT	(\$) 1,020.00	Attorney Docket	No.	C1041.70010L	1500	
METHOD OF PAYMEN	T (check all the	nat apply)		<del></del>			
X Check Credit C	ard M	1oney Order No	one Other	(please ide	entify):		
Deposit Account Depo	sit Account Numb	er: 23/2825 Deposit A	count Name:	Wolf	, Greenfield & Sa	acks, P.C.	
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FEE CALCULATION							
1. BASIC FILING, SEARCH	I, AND EXAM						
		-	EARCH FEES	EXAM	INATION FEES <u>Small Entity</u>		
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (	\$ Small Entity \$) Fee (\$)	Fee (\$		Fees P	aid (\$)
Utility	300	150 500	250	200	100		
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100	0	0	0		
2. EXCESS CLAIM FEES							Small Entity
Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues) 50 25							
Each independent claim ov	Each independent claim over 3 (including Reissues) 200 100						
Multiple dependent claims						360	180
<u>Total Claims</u> <u>Extra</u>	Claims F	ee (\$) Fee	Paid (\$)		Multiple Depende	ent Claims	
10 20 =					Fee (\$)	Fee Paid (\$)	!
HP = highest number of total cla							-
		Fee (\$) Fee =	Paid (\$)				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEI	E						_
If the specification and dr	awings excee	d 100 sheets of pape	r (excluding elect	ronically	filed sequence or	computer	
listings under 37 CFR sheets or fraction there	1.52(e)), the cof. See 35 U	application size fee of I.S.C. 41(a)(1)(G) an	lue is \$250 (\$125 d 37 CFR 1.16(s).	for small	entity) for each a	dditional 50	
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4. OTHER FEE(S)  Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
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SUBMITTED BY			I Designation of				
Signature 00	nher	lat	Registration No. (Attorney/Agent)	39,24	8 Telephone	(617) 646	3-8000
Name (Print/Type) Helen C.	Lockhart				Date	February 1	5, 2007

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